

obsolete. For some years dentists on the Pacific Coast have realized that dead teeth cannot be rendered permanently aseptic. In view of present knowledge it is truly startling to find that Ivy advocates the toleration of streptococcal infection until such time as systemic states, in some cases probably incurable, have reached a diagnosable stage. Of the 144 pages only 47 are devoted to reading matter. The rest of the book is given up to illustrations of roentgenographic prints. Many of these illustrations aiming to instruct one unfamiliar with the work how to interpret roentgenograms, are inadequate for this purpose, and they are of little value to one who has already learned how to interpret roentgenograms. Moreover, some of the prints are misleading since they picture case after case pronounced "normal" which indicate the need of radical operation because of pathology clearly indicated in the prints. On the whole, then, the book, in spite of the emphasis given to some good points, is at least five years behind the times.

J. N.

**Diseases of the Male Urethra.** By Irvin S. Koll, M. D., Professor of Genito-Urinary Diseases, Post-Graduate Medical School and Hospital, Chicago. Octavo of 151 pages, with 123 illustrations, several in colors. Philadelphia and London: W. B. Saunders Company. 1918. Cloth, \$3.00 net.

This monograph of fourteen chapters gives the personal experience of the author, and as such is concise and brief. Many of the facts expressed are probably not shared by the majority of his colleagues. Anatomical descriptions are disappointing and often confusing, as, for instance, in the first chapter, the urethra is divided into a pelvic, perineal, scrotal and penile portion, but in chapter VIII in connection with stricture of the anterior urethra a navicular, penile and bulbous portion is considered. Warden's views concerning the transmutation of the gonococcus are quoted at length in chapter III, but in the next chapter the author contradicts himself by saying that a gram-negative intercellular diplococcus always means gonorrhea. In a very brief chapter on diagnosis the many useful glass tests receive no mention whatever, the two glass test being listed as the only one of any value and then dismissed "as neither necessary nor essential as it is not a difficult matter to differentiate between anterior and posterior urethritis symptomatically or subjectively without it." The author uses albargin ointment in the treatment of acute gonorrhea and states that he can abort in five to ten days all acute cases seen within twenty-four hours of the onset of a discharge. In the treatment of chronic prostatitis the author depends mostly upon massage two to three times weekly which he states should be "continued as long as any pus or detritus is expressed from the gland," which he determines "solely by the appearance of the urine voided after massage." Seminal vesiculitis in the author's opinion always accompanies prostatic infection, but no outline whatever for the treatment of the condition is given. In the chapter on stricture fibrolysin is recommended "one ampule injected intravenously on three successive days." In cases of acute urinary retention the much abused suprapubic trocar is advocated. The monograph is of considerable interest and value to specialists, as an expression of the author's personal experience, but so many of the views are reactionary with no mention of other better recognized methods that it cannot be recommended to the student.

F. H.

**Typhoid Fever Considered as a Problem of Scientific Medicine.** By Frederick P. Gay. Cloth; price, \$2.50 net. New York: Macmillan. 1918.

In this book the author has succeeded in summarizing critically our present knowledge of typhoid fever. The treatise represents a well-balanced compilation of the accumulated laboratory and clinical

facts on enteric fevers. Many of the statements are enhanced by the author's personal research, particularly the chapters on artificial immunization and the protective value of vaccination against typhoid fever. Important statistical data are presented for the first time in a comparative form and illustrate conclusively the progress scientific medicine has made in the control of typhoid fever. Most of the other chapters may be classed as valuable reviews of the more modern views and problems of this disease. To the specialist in public health, laboratory diagnosis or experimental pathology, however, the chapters on the modes of infection, diagnosis, the carrier condition, and the treatment of typhoid fever are somewhat disappointing. Unverified statements published in the literature and conclusions drawn from a limited number of experimental observations are used to support some of the author's conceptions of the pathogenesis and immunity of enteric infections. There are also some important omissions, for example, the recognized value of brilliant green in the isolation of enteric fever organisms from the stool is barely mentioned, and the use of glycerine as a preservative for typhoid stools (Teague and Clurman, Benians) have been overlooked. Unfortunately the chapter on carriers does not include Chesley's interesting statistical material (*Jour. Am. Med. Assn.*, 1917, 68), which is the first comprehensive review of the carrier situation in America, and which in itself could have enhanced the chapter on suggested methods of advance in solving the typhoid problem. And again, just as several workers (see Zinsser, "Infection and Resistance," 2nd Edition, 1918, p. 310) were unable to confirm the observations on specific hyperleucocytosis, which Professor Gay still considers the most important function producing the striking results sometimes noted in intravenous vaccine therapy of typhoid fever, those studying the experimental typhoid carriers state in animals, will be obliged to disagree with the author of the treatise relative to many of his statements and conclusions. These few impressions which the reviewer gained by reading the book very carefully do not, however, reduce the general value of the publication, which unfortunately has no index. The bibliography is fairly complete, there are unintentional and intentional omissions. Some references are incomplete, others are not quoted according to a uniform plan and the names of some authors are misspelled.

K. F. M.

**Blood Transfusion, Hemorrhage and the Anemias.** By B. M. Bernheim. Cloth. 259 pages. Philadelphia: Lippincott. 1918.

Bernheim says in his preface, "It has been my purpose to adhere to the practical side of the subject, both as regards discussions of indications and selection of transfusion methods. Theoretical considerations have been eliminated as far as possible and the future uses to which blood transfusion may be put have hardly been suggested, since the book is meant for the man who is engaged in clinical work of this nature, and desires to know concretely what is being done and how to do it." The bibliographies at the ends of the chapters will guide those who wish to go into the subject farther. The book is entertainingly written and is the outcome of lengthy experience and assiduous study. It fulfills, in the main, the purpose for which it is intended. However, some of its statements are open to criticism. To say that "the death-knell of direct transfusion has been sounded" (page 89) is putting it too strongly. The indirect citrate method has many advantages, but certainly a technic which provokes a chill and a severe reaction in about 25% of all recipients and causes unknown and uncontrollable changes in the blood is open to improvement. It may be doubted whether this method will not ultimately be abandoned. The elaborate description of Crile's and Elsberg's methods, which are of purely historical interest, might